			Application or Docket Number											
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									09,750,604					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENT		OR	OTHER SMALL E		
TOTAL CLAIMS					1			RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 3	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			→ minus 20=		$\cdot \phi$			X\$ 9=			OR	X\$18≖		
INDEPENDENT CLAIMS			minus 3 =		• 1			X40=			OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT						. [OR	+270=		
* if the difference in column 1 is less than zero, enter *0* in column 2							1	TOTA	ı		OR	TOTAL		
8 9 04 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	i Fi	VIIIV	OR	OTHER SMALL		
וא	4/04	(Column 1)			mn 2) KEST	(Column 3)	۱ ا	SHIAL		ADDI-			ADDI-	
۲ ۲		REMAINING AFTER		PREVI	IBER OUSLY	PRESENT EXTRA		RATE		IONAL FEE		RATE	TIONAL FEE	
AMENDMENT A	Total	AMENDMENT 6	Minus	<u> </u>	FOR_	#		X\$ 9=	#	ree_	OR	X\$18=	155	
NEN I	Independent	· <i>H</i>	Minus	/	7.	=		X40-	. †		OR	X80=		
P	FIRST PRESEN	ITATION OF MI	JLTIPLE DEF	ENDEN	T CLAIM			+135:			OR	+270=		
								101			OR	TOTAL		
7.) 2-15 (Column 1) (Column 2) (Column 3)								ADDIT, FEEOF ADDIT, FEE						
_	· 39-02	(Column 1)		HIG	REST	(Column 3)	1		Т	ADDI-	ı		ADDI-	
M E	•	REMAINING AFTER		PREV	VBER HOUSLY O FOR	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
DME	Total	• 13	Minus	•• ^	7 9	= \	1	X\$ 9	=		OR	X\$18=		
AMENDMENT B	Independent	• 4	Minus	•••	4	= \]	X40=	= †	-	OR	X80=		
Ľ	FIRST PRESENTATION OF M		ULTIPLE DEPENDEN		T CLAIM		j	+135	_		OR	+270=		
									TAL		OR	TOTAL		
			•					ADDIT. F	EEL		J O. 1	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											•		ADDI-	
AMENDMENT C	:	REMAINING AFTER AMENDMENT		NU PRE\	MBER NOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	TIONAL	
O WE	Total	•	Minus			=		X\$ 9	= .		OR	X\$18=	ï	
MEN	Independent	•	Minus	•••		•	4	X40	. 1		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135			OR			
	If the entry in colu	mn 1 is less than	the entry in col	umn 2, w	itte "O" in c	olumn 3.		1	TAL		OF	TOTAL		
"If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column.											AUUII. PEI	: 		
	The "Highest Nur	ber Previously P	ald For (Total	or Indepe	ndent) is t	ne highest numi	ber f	ound in th	ne epp	ropriete b	ox in c	xotumn 1.		

FORM PTO-675 (Rev. 8/00) Potent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

*U.S. CPO: 2000-460-70200100